State: Arkansas Filing Company: Bankers Fidelity Life Insurance Company

TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010

Product Name: 2012 Medicare Supplement Multiple Policy Report

Project Name/Number: /

#### Filing at a Glance

Company: Bankers Fidelity Life Insurance Company

Product Name: 2012 Medicare Supplement Multiple Policy Report

State: Arkansas

TOI: MS09 Medicare Supplement - Other 2010
Sub-TOI: MS09.000 Medicare Supplement Other 2010

Filing Type: Form

Date Submitted: 01/16/2013

SERFF Tr Num: BFLI-128853567

SERFF Status: Closed-Accepted For Informational Purposes

State Tr Num:

State Status: Closed-Accepted for Informational Purposes

Co Tr Num: AR 2013 MPR

Implementation On Approval

Date Requested:

Author(s): Jill Jones, Bridgett Williams, Tina Cunningham, Lyn Ezell, Sharon White

Reviewer(s): Stephanie Fowler (primary)

Disposition Date: 01/17/2013

Disposition Status: Accepted For Informational Purposes

Implementation Date:

State Filing Description:

State: Arkansas Filing Company: Bankers Fidelity Life Insurance Company

TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010

Product Name: 2012 Medicare Supplement Multiple Policy Report

Project Name/Number: /

#### **General Information**

Project Name: Status of Filing in Domicile: Authorized
Project Number: Date Approved in Domicile: 01/09/2013

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Overall Rate Impact: Filing Status Changed: 01/17/2013

State Status Changed: 01/17/2013

Deemer Date: Created By: Tina Cunningham

Submitted By: Tina Cunningham Corresponding Filing Tracking Number:

Filing Description:

The attached Annual Multiple Policy Report is being submitted to you in compliance with your state Medicare supplement regulations. Our records indicate that we do not have any policyholders with multiple Medicare supplement policies.

#### **Company and Contact**

#### **Filing Contact Information**

Tina Cunningham, Compliance Analyst L1 tcunningham@atlam.com
4370 Peachtree Road NE 404-266-5723 [Phone]
Atlanta, GA 30319 404-926-4092 [FAX]

**Filing Company Information** 

Bankers Fidelity Life Insurance CoCode: 61239 State of Domicile: Georgia Company Group Code: 587 Company Type: Life & Health

4370 Peachtree Rd NE Group Name: 61239 State ID Number:

Atlanta, GA 30319 FEIN Number: 58-0658963

(404) 266-5600 ext. [Phone]

### **Filing Fees**

Fee Required? No Retaliatory? No

Fee Explanation:

State: Arkansas Filing Company: Bankers Fidelity Life Insurance Company

TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010

**Product Name:** 2012 Medicare Supplement Multiple Policy Report

Project Name/Number: /

## **Correspondence Summary**

#### **Dispositions**

Status	Created By	Created On	Date Submitted
Accepted For	Stephanie Fowler	01/17/2013	01/17/2013
Informational			
Purposes			

State: Arkansas Filing Company: Bankers Fidelity Life Insurance Company

TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010

**Product Name:** 2012 Medicare Supplement Multiple Policy Report

Project Name/Number: /

## **Disposition**

Disposition Date: 01/17/2013

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	Medicare Supplement Multiple Policy Report	Accepted for Informational	Yes
		Purposes	

State: Arkansas Filing Company: Bankers Fidelity Life Insurance Company

TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010

Product Name: 2012 Medicare Supplement Multiple Policy Report

Project Name/Number: /

## **Supporting Document Schedules**

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	N/A as this is a report.		
		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	N/A as this is a report.		
		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification		
Bypass Reason:	N/A as this is a report		
		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage		
Bypass Reason:	N/A as this is a report.		
		Item Status:	Status Date:
Satisfied - Item:	Medicare Supplement Multiple Policy Report	Accepted for Informational Purposes	01/17/2013
Comments:			
Attachment(s):			
BFLIC Multiple Policy Rep	port 01-07-2013.pdf		

# FORM FOR REPORTING MEDICARE SUPPLEMENT POLICIES

Company Name:

Bankers Fidelity Life Insurance Company

Address:

4370 Peachtree Road, N.E.

P.O. Box 105185

Atlanta, Georgia 30348-5185

**Phone Number:** 

(404) 266-5600; (800) 241-1439

Due: March 1, annually

The purpose of this form is to report the following information on each resident of this state who has in force more than one (1) Medicare supplement policy or certificate. The information is to be grouped by individual policyholder.

Policy and Certificate Number	Date of Issuance
NONE	NONE

Jill M. Jones, FLMI, AIRC, FLHC, ACS, AIAA, ARA

Director, Legal/Compliance

(404) 266-5657; fax (404) 926-4034

jjones@atlam.com

01-07-2013

Date